

MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)

SERIAL NO.

10/567,444

FILING DATE

2-7-06

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1 ST AMENDMENT		AFTER 2 ND AMENDMENT			AS FILED		AFTER 1 ST AMENDMENT		AFTER 2 ND AMENDMENT	
	ARTICLE 34		IND.	DEP.	IND.	DEP.		IND.	DEP.	IND.	DEP.	IND.	DEP.
	1		1					51		51			
2		1			1			52					
3		1			1			53					
4		3			1			54					
5					1			55					
6					1			56					
7					1			57					
8					1			58					
9					1			59					
10					1			60					
11					1			61					
12					1			62					
13					1			63					
14					1			64					
15					1			65					
16					1			66					
17					1			67					
18					1			68					
19					1			69					
20					1			70					
21					1			71					
22								72					
23								73					
24								74					
25								75					
26								76					
27								77					
28								78					
29								79					
30								80					
31								81					
32								82					
33								83					
34								84					
35								85					
36								86					
37								87					
38								88					
39								89					
40								90					
41								91					
42								92					
43								93					
44								94					
45								95					
46								96					
47								97					
48								98					
49								99					
50								100					
TOTAL IND.	1	↓	1	↓		↓		TOTAL IND.	↓	↓	↓		
TOTAL DEP.	20	←	20	←		←		TOTAL DEP.	←	←	←		
TOTAL CLAIMS	21		21					TOTAL CLAIMS					